DECLARATION OF EMERGENCY

Department of Health Bureau of Health Services Financing

Healthcare Services Provider Fees Emergency Ambulance Service Providers (LAC 48:I.4001, 4003 and 4007)

The Department of Health, Bureau of Health Services

Financing amends LAC 48:I.4001, 4003 and 4007 in the Medical

Assistance Program as authorized by R.S. 36:254 and R.S.

46:2625. This Emergency Rule is promulgated in accordance with
the provisions of the Administrative Procedure Act, R.S.

49:953(B)(1) et seq., and shall be in effect for the maximum
period allowed under the Act or until adoption of the final
Rule, whichever occurs first.

The Department of Health and Hospitals, Office of Management and Finance, amended and repromulgated the regulations governing provider fees for certain health care services pertaining to the administration of fees and the rights and obligations of service providers on whom such fees are imposed (Louisiana Register, Volume 26, Number 7).

Act 305 of the 2016 Regular Session of the Louisiana

Legislature directed the Department of Health to establish

qualifying criteria and implement a provider fee for qualified

providers of emergency ground ambulance services.

In compliance with Act 305, the Department of Health,
Bureau of Health Services Financing amends the provisions

governing provider fees for certain health care services in order to implement a provider fee assessment for qualifying emergency ground ambulance service providers.

This action is being taken to avoid a budget deficit by securing new funding through increased revenue collections. It is estimated that implementation of this Emergency Rule will increase revenue collections in the Medicaid Program by approximately \$2,092,091 for state fiscal year 2016-2017.

Effective August 1, 2016, the Department of Health, Bureau of Health Services Financing amends the provisions governing provider fees for certain health care services in order to implement a provider fee assessment for qualifying emergency ground ambulance service providers.

Title 48 PUBLIC HEALTH—GENERAL Part I. General Administration Subpart 1. General

Chapter 40. Provider Fees

§4001. Specific Fees

A. Definition

Net Operating Revenue-the gross revenues of an emergency ground ambulance service provider for the provision of emergency ground ambulance transportation services, excluding any Medicaid reimbursement, less any deducted amounts for bad debts, charity care and payer discounts.

- B. D. ...
- E. Medical Transportation Services. Effective for dates of service on or after August 1, 2016, qualifying emergency ground ambulance service providers shall be assessed a fee of one and one-half percent of net operating revenue.
- 1. Qualifying Criteria. Ambulance service providers must meet the following requirements in order to be assessed the applicable fee. The ambulance service provider must be:
 - a. licensed by the State of Louisiana;
 - b. enrolled as a Louisiana Medicaid provider;
- c. a provider of emergency ground ambulance transportation services as defined in 42 CFR 440.170 and Medical and Remedial Care and Services, Item 24.a; and
- d. a non-federal, non-public provider in the state of Louisiana, as defined in 42 CFR 433.68(c)(1), of emergency ground ambulance services that is contracted with a unit of local or parish government in the state of Louisiana for the provision of emergency ground ambulance transportation on a regular 24-hour per day and seven days per week basis.

AUTHORITY NOTE: Promulgated in accordance with Chapter 45 of Title 46 as enacted in 1992, 46:2601-2605, redesignated as Chapter 47 of Title 46, containing R.S. 46:2621 to 46:2625 and PL 102-234.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, LR 19:347

(March 1993), amended LR 20:51 (January 1994), LR 26:1478 (July 2000), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 33:100 (January 2007), amended by the Department of Health, Bureau of Health Services Financing, LR 42:

§4003. Due Date for Submission of Reports and Payment of Fees

- A. ...
- B. Medical Transportation Services. Effective August 1, 2016, qualified ambulance service providers will be assessed a fee at the end of each quarter not to exceed one and one-half percent of the net operating revenue of emergency ground ambulance service providers.
- 1. Qualified ambulance service providers will provide the Department of Health (Department) a monthly net operating revenue report for emergency ground ambulance transportation services by the fifteenth business day of the following month.
- 2. Qualified ambulance service providers will be issued a quarterly notice within 30 days from the end of the quarter. Payment will be due to the Department by qualified ambulance service provider within 30 days from date of notice.

AUTHORITY NOTE: Promulgated in accordance with Chapter 45 of Title 46 as enacted in 1992, 46:2601-2605, redesignated as Chapter 47 of Title 46, containing R.S. 46:2621 to 46:2625 and PL 102-234.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, LR 19:347 (March 1993), amended LR 26:1479 (July 2000), amended by the Department of Health, Bureau of Health Services Financing, LR 42:

§4007. Delinquent and/or Unpaid Fees

- A. Interest on Unpaid Provider Fees Other Than Medical Transportation Provider Fees. When the provider fails to pay the fee due, or any portion thereof, on or before the date it becomes delinquent, interest at the rate of one and one-half percent per month compounded daily shall be assessed on the unpaid balance until paid. In the case of interest on a penalty assessed, such interest shall be computed beginning 15 days from the date of notification of assessment until paid.
- B. Collection of Delinquent Provider Fee Other Than
 Medical Transportation Provider Fees
 - 1. D. ...
 - E. Emergency Ground Ambulance Service Provider Fees
- 1. Penalties and Interest for Non-Payment of Assessment

- a. If the Department audits a qualifying ambulance service provider's records and determines the net operating revenue reported is incorrect for the assessment collected, the Department shall fine the qualifying ambulance service provider .15 percent of the corrected assessment. The fine is payable within 30 days of the invoice.
- b. If a qualifying ambulance service provider fails to fully pay its assessment on or before the due date, the Department shall assess a late penalty of .15 percent of the quarterly calculated assessment. The Department shall reserve the right to suspend all Medicaid payments to a qualifying ground ambulance service provider until the provider pays the assessment and penalty due in full or until the provider and the Department reach a negotiated settlement.

AUTHORITY NOTE: Promulgated in accordance with Chapter 45 of Title 46 as enacted in 1992, 46:2601-2605, redesignated as Chapter 47 of Title 46, containing R.S. 46:2621 to 46:2625 and PL 102-234.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, LR 19:347 (March 1993), amended LR 20:1114 (October 1994), LR 26:1479 (July 2000), amended by the Department of Health, Bureau of Health Services Financing, LR 42:

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Interested persons may submit written comments to Jen Steele, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030 or by email to MedicaidPolicy@la.gov. Ms. Steele is responsible for responding to inquiries regarding this Emergency Rule. A copy of this Emergency Rule is available for review by interested parties at parish Medicaid offices.

Rebekah E. Gee MD, MPH

Secretary